REPRESENTATIVE OF INVENTOR OR OWNER

4-11-02 402.06

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/503,656
Filing Date	02/14/2000
First Named Inventor	William E Baumzweiger
Group Art Unit	3736
Examiner Name	Michael C. Astonno
Attorney Docket Number	50065

			-						
To: Assistant Commissioner for Patents Washington, DC 20231									
t hereby apply to withdraw as attorney or agent for the above identified patent application.									
The reesons for th	The reasons for this request are:								
Communication has broken down between the two applicants and myself as the attorney of record to the extent that I cannot comply with the rules of practice of the PTO. No reply to the last official action is required by the applicants until April 24, 2002 so that the applicants will not be prejudiced by my withdrawal. The complete file in this matter is being sent to another attorney at this time in any event. A copy of this request is being sent to the applicants so that they will have ample time to arrange for new representation if they so desire. The correspondence address is NOT affected by this withdrawal. Change the correspondence address and direct all future correspondence to:									
		CORRESPONDENCE ADDRE		-					
Customer Number [Place Customer Number Ber Code Label here					
Firm or Individual Name	,	William E Baumzweiger, MD	·						
Address		18399 Ventura Blvd, Suite 245					 		
Address				-			·		
City		Tarzana	State	CA	1	ZIP	91356		
Country		USA							
Talaphone		818-342-2009	Fax	818	-342-941	12			
This request is enclosed									
Name	Nat	than Boatner, Reg No 32856							
Signature		A							
Date		03/08/2002							
NOTE: Withdrawal is effective when approved rather their when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.									

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Palent and Tredement Office, Westington, DC 20231. DO NOT SEND FEES OF COMPRETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patente, Westington, DC 20231.

APPROVED JOHN E. KITTLE 4 DIRECTOR

400-7

August 2001

TECHNOLOGY CENTER 3700 & 2900

CERTIFICATE OF SERVICE AND OF MAILING

I certify that on this day of 03/05/2002 I enclosed a true copy of the attached Request For Withdrawal As Attorney Or Agent in the United States mail with postage prepaid at Mira Loma, California, addressed as follows:

Dr William E Baumzweiger, MD, 18399 Ventura Blvd, Suite 245 Tarzana, CA, 91356

Dr Kathleen L Hannan, MD 2161 Palm Beach Lakes Blvd, #100 West Palm Beach, FL, 33409

Assistant Commissioner For Patents Washington, DC, 20231

DATED: 03/08/2002

Nathan Boatner Reg No 32856